



Advancing through change

Quality Account 2017-18

Inside Stories:



The theme of the 2017-18 Quality Account is *Advancing* through change

The theme of the 2017-18 Quality Account is 'Advancing Through Change'.

Several of the articles in this report focus on how our organisation has successfully navigated through significant changes to health service delivery. Perhaps the biggest change has been our introduction of the wellbeing coordinators as the front of house contact to ensure you are living well at home.

Change also means advancement in technology and service. The most important advancement in technology to RNH in recent times has to be Telehealth video conferencing. Telehealth is saving our community members hundreds of hours of travel time as well as saving thousands of dollars in fuel and accommodation costs, simply by hooking up a video link with their medical specialist.

We hope you enjoy reading our Quality Account as much as we enjoyed preparing it for you. You will learn much about Rural Northwest Health service delivery and you will find graphic documentation to demonstrate our performance. If you wish to know more about your health service, you are welcome to contact our office on 5396 1200.

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Front cover

The front cover this year is a great representation of Advancing Through Change. The picture captures a moment where St Mary's Primary School student Maggie Butcher is showing Wattle Crescent resident Margaret how to use the new interactive touch screen TV which has been installed in the Memory Support unit. Students from the Warracknabeal school make regular trips to Wattle to spend one-on-one time with residents. You can learn more about this program on pages 43

The team that worked on the 2017-18 Quality Account included Wendy Walters, Jo Martin, Natalie Ladner, Wendy James, Ngareta Melgren, Dr Kaye Knight, Kerry Seater and Peter Miller.

Photographs: Peter Miller, Nicole Christian and Wendy Walters

Editor: Peter Miller

This account is available to community members on Rural Northwest Health's website www.rnh.net.au or copies are available from the Warracknabeal, Hopetoun and Beulah campuses. Community members can contact Rural Northwest Health on 5396 1200 and a copy of the report will be emailed on request. Copies are also available at various businesses in Hopetoun, Beulah, Brim and Warracknabeal.

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Board directors Janette McCabe, Dr John Aitken, Carolyn Morcom and Glenda Hewitt surround the new chair Julia Hausler.



Absent from Photo:
Professor Amanda Kenny

Welcome



Jo Martin
Acting CEO



Julia Hausler
Chair

On behalf of the Rural Northwest Health Board of Directors, Executive and Team Members it gives us great pleasure to present the Rural Northwest Health Quality Account for 2017/18.

The Quality Account provides us the opportunity to demonstrate how we all work to improve the health and well-being of our Yarriambiack community.

Rural Northwest Health strives to enhance performance, improve safety and quality in care and achieve higher levels of patient, resident and team member satisfaction. To assist us in improving healthcare outcomes, Rural Northwest Health actively engages with our residents, patients, their families, carers, health care partners, our team members and the Department of Health and Human Services.

Our feedback luncheons, surveys, ongoing research, university partnerships and community forums provide us with the opportunity to continually improve. Our goal is to make Rural Northwest Health the best place for treatment and care.

We thank the efforts of our Rural Northwest Health team members, volunteers and partners who dedicate themselves to continually improve the well-being of our patients, residents and community. We hope you will enjoy reading our Quality Account and please do not hesitate to contact us to let us know what you think of our report or what information you would like us to share with you in the future.

About *Our* Organisation

Rural Northwest Health is a Victorian public sector health service created under the Health Services Act and responsible to the Minister for Health, The Honourable Jill Hennessy, MP.

The population for Yarriambiack Shire is 7088 (ABS, census 2011). Rural Northwest Health covers the northern part of the Shire and shares the southern part with West Wimmera Health Services. Between our three campuses at Warracknabeal, Beulah and Hopetoun, we provide a comprehensive range of acute, aged and primary health services to the local community.

The key focus of Rural Northwest Health is caring and supporting people to be healthy and living a full life. Our logo represents this by the carer reaching out and embracing its community over the broad horizon.

Our team members provide care and programs that offer wide-reaching community support and a warm and comforting approach. Rural Northwest Health is committed to achieving the best health for the Wimmera Mallee community.

We recognise our clients / residents' total needs in order for them to achieve optimal health and wellbeing. We believe that our clients/residents are entitled to quality health care that respects their dignity, beliefs and rights, regardless of their cultural, spiritual or socio-economic background.



Mission

Rural Northwest Health will provide accessible, efficient and excellent care to our community within the Wimmera Mallee Region.

Vision

Moving together through change to provide innovative rural health care.

Volunteering

Please complete and return this form to Rural Northwest Health, Dimboola Rd, Warracknabeal, 3393 or contact administration on 5396 1200.

Family Name

Given Name

Address

.....

.....

Post Code

Phone

Email

What are you Interested in?

☐

Representing consumers on hospital committees or working groups

☐

Being a voice for the community

☐

Volunteering in Aged Care

☐

Volunteering in Day Program

☐

All of the above

Aged care

scoops for RNH

Rural Northwest Health has scooped the pool in aged care notoriety after winning the major title at the 2017 Victorian Healthcare Awards.

Yarriambiack Lodge and Hopetoun campus won the public sector excellence in aged care award for its exclusive ABLE model of care and the extension of its memory support nurse. The award was open to every public aged care service in Victoria and it comes on the back of another state award.

Two weeks before the Victorian Healthcare awards, Rural Northwest Health was announced the winners of Employer Excellence in Aged Care at Victoria's Regional Achievement and Community Awards. Rural Northwest Health's manager of aged care at Warracknabeal campus Wendy Walters said she was proud of her team.

"The aged care team has a wonderful understanding of the ABLE model that we created a few years ago and that's why it works so well for our residents, especially those living with dementia," Ms Walters said.

"The importance of the ABLE model is that it's not just about the care team," she said.

"Environmental Services also play an important role, as do Community Health clinicians so it's a genuine team effort.

"They have all worked hard with study and training to make sure the ABLE model is delivered correctly."

Ms Walters said they were clearly doing

something right to receive such high recognition from two separate entities in a matter of weeks.

"It's testament to the team performance that these awards have come our way because we know everyone in this industry works with dedication and care for their residents," she said.

Rural Northwest Health's ABLE model focuses on the ability of each individual resident so they have continued capacity and the opportunity to keep doing things that they want to do. Its fundamental principles are Abilities, Background – focusing on the individual, Leadership and organisational culture and Environment – physically stimulating, welcoming and ability focused.

Ms Walters said memory support nurse Katie Ramsdale deserved praise with the latest award.

"Katie has done a great job of taking our memory support service to the community so that we can do our best to help people living with dementia to remain in their own homes for as long as possible.

"She was already doing a great job with this role in Yarriambiack Lodge but now she is visiting people living with dementia all across the region and showing them Montessori techniques to help them cope."

Other finalists for the award were metropolitan-based Monash Health and Peninsula Health.





Wendy James, Sarah Kleinitz, Katie Ramsdale, Wendy Walters, Leo Casey, Jo Martin and Janette McCabe with the aged care award.



This picture is a great example of the extra mile Rural Northwest Health goes to ensure it remains Victoria's best aged care facility.

In March, all aged care team members took part in training sessions where they spent the day as a resident in care. The intention behind the sessions was to give each nurse and carer an understanding of what it was like to be a resident relying on their support. Pictured taking part in the training are nurses Betty Bartlett and Kimberly Barker with resident Margaret.

Bev is a *grateful* survivor

A Warracknabeal woman who earlier this year required life saving measures is enjoying life at home once more.

Bev Souter is in her 50s and has maintained a healthy lifestyle but on a chilly autumn morning, she developed a migraine. Bev had suffered migraines before but this was her first in four years.

She visited her GP that morning and was given an injection to alleviate her pain.

Later on, she visited the Warracknabeal campus of Rural Northwest Health where she had a 1pm appointment with a Community Health clinician. During her treatment there, Bev deteriorated rapidly.

Immediately, a Code Blue was called which is the signal for a medical emergency. Two doctors rushed to the room where Bev had collapsed. Several nurses and allied health team members also attended.

As soon as Bev was assessed as safe to move, she was transferred to RNH's Urgent Care unit so she could be further stabilised under the supervision of Dr Franklin and Urgent Care nurse unit manager Jason Hay.

Mr Hay said Bev had continued to deteriorate while in Urgent Care.

"The symptoms that she presented with were not indicative of any one particular issue," Mr Hay recalled.

"It could have been any of five different illnesses that had caused her deterioration," he said.

"She would require extensive medical imaging to help with further assessment and a final diagnosis, so Bev was transferred to Wimmera Health Care Group.

"We contacted the hospital immediately so they could get Bev straight into medical imaging with out any delays."

Within two hours of collapsing during her appointment, Bev was in the care of Wimmera Health Care Group nursing staff. She had deteriorated further while there and was put on life support.

An immediate video conference was set up in Horsham with



Bev Souter recovers at home.

Victorian Stroke Telemedicine at Austin Hospital in Melbourne to rule out the possibility of a stroke. Bev had continued to deteriorate and was intubated. By 6pm she was flying air ambulance to Melbourne where she was transferred to the Western Hospital.

There, Bev was examined by a neurologist and an intensivist where it was determined she had an allergic reaction to medication given earlier that day. She was given further treatment to alleviate the initial symptoms and then started the recovery phase from her acute medical condition.

Bev said when she woke up at Western Hospital she had no idea of her location.

"I got a real fright because the last thing I remember was being in the waiting room at Yarriambiack Medical Clinic," Bev said.

"I had no idea what had happened or how I had ended up in Melbourne," she said.

"I was very fortunate that my daughter Kirsty was there to support me through all that."

After several days of recovery, Bev returned to Warracknabeal, still unable to recall her sudden collapse but grateful for the fast attentive actions of the medical and nursing team that supported her.

Mr Hay said he was pleased with the efficiency of his Urgent and Acute team and that of the attending doctors.

"It was good that we were able to scan Bev's medical record into the digital medical records under our new Bossnet system," Mr Hay said.

"This meant that the treating medical team in Horsham could review her progress and treatment before the patient was in their care," he said.

"Within 10 minutes of the patient arriving, she was able to receive some of the necessary imaging whereas in the past, this could take up to four hours of waiting in Horsham.

"In Bev's case, that would have been severely detrimental."

Bev is no stranger to urgent care and the hospital system. As a young woman, she was not expected to survive a serious illness. Years later, she nursed her partner Daryl until he passed away two years ago and her mother Anne who died last year.

But Bev said she had a new respect for the standard of care at rural health services.

"After spending a few days in Melbourne hospitals, I can honestly say I was looked after much better while I was in Horsham and Warracknabeal," Bev said.

"And they are still looking after me well at home," she said.

"I have regular appointments with my doctor, the RNH dietitian and social worker and they have all been fantastic.

"Now I am also getting excellent attention from the wellbeing coordinators, particularly Tim who has been so supportive."

Bev said she was also receiving great support from community volunteers driving her to appointments.

"It's really opened my eyes to how lucky we are to have the services we do right here in Warracknabeal," she said.



Acute nurse Keshia Roche and nurse unit manager Jason Hay were among clinical team members who responded to the code blue and helped stabilise Bev.

Recognising why we are *unique*

Treating everyone with respect, whether they are team members, organisational partners or clients, is of utmost importance to our health service.

Driven by enthusiastic team members, RNH developed a diversity plan two years ago. The diversity group is constantly actioning strategies inspired by the plan, along with the latest research and the life experiences of the team.

They implement the goals to ensure RNH is an employer of choice for all - as well as providing services for all diverse groups.

RNH support services manager Jo Martin heads the group. Ms

Martin said the group met quarterly and discussed areas where support for diversity could be improved.

"While we acknowledge there are many diverse groups, we are currently focusing on five diverse communities; gender inequality, older persons, all abilities, culturally diverse and lesbian, gay, bisexual, transgender and intersex persons," Ms Martin said.

"We are working at creating a greater awareness among team members and we want to increase our understanding and empathy for the five different groups in particular," she said.

"We are proud of what we have achieved so far but we have plenty of strategies in the pipeline."



Yarriambiack Lodge carer Ashish Sahi prepares a Nepalese dish with help from Environmental Services manager Trenton Crisp to celebrate Harmony Day.



Team members Janine Patullo, Jo Martin, Ngareta Melgren, Peter Miller, Wendy James and Wendy Walters were among many who supported White Ribbon Day in October, 2017.



Maps of the world allowed team members to pin their origin. This program created a great deal of interest.



Day Group client Margaret Humphrys enjoys the Nepalese dish with nurse Amanjit Brar.

Achievements to date include:

- Bearing Aboriginal and Torres Strait Islander flags at each campus to acknowledge our traditional owners. This resulted from a cultural audit of our campuses.
- Presented in 14 different sessions, a Family Violence training program to more than 220 team members. We acknowledge the enormous impact Family Violence has on the community and we will soon be training frontline team members to recognise, respond and refer through Lifeline's DV-Alert program.
- The appointment of a family violence coordinator for team members to contact with complete confidentiality if they are experiencing any level of effect. We also offer free support through an employee assistance program.
- Educating team members to have an awareness of potential violations among community members and to follow with the appropriate response.
- Progressing the e-rainbow equality standards in relation to LGBTI populations.

- Organised team members from different cultures to cook traditional meals and dress in their native attire during Harmony Day celebrations. There were also dance demonstrations for this event.
- Conducted an audit of accessibility for those with mobility and literacy limitations.
- Provided a maternity package for expectant parents and organised breastfeeding spaces at our campuses as well as storage space for infant needs.
- Ensured RNH recruitment documents supported team members of all diversities and encouraged them to apply for roles in the organisation.

Notice boards at the Warracknabeal and Hopetoun campuses have been designated exclusively for promotional material from the diversity group.

Promotions have included a White Ribbon display to support victims of family violence, a world map pinpointing the birthplace of every team member (see picture above) and a rainbow display to support our LGBTI team members.



Responsibility *falls* on Sarah



A spike in falls among Yarriambiack Lodge residents earlier this year, took new nurse unit manager Sarah Kleinitz by surprise.

While falls are a regular occurrence at any aged care facility, Rural Northwest Health had always boasted a proud record of low numbers for such incidents. March had an abnormally high increase and it prompted Sarah to take immediate action to ensure this spike was an anomaly.

Sarah chose to involve her team by forming a falls prevention committee to investigate the circumstances around the spike and to work at avoiding any further surges. Sarah heads the team which includes physiotherapist Brett Boyle, health and safety officer Gary Bellis and personal carers Sam McLaren and Brock Sturrock.

The committee completed an audit on falls, prevention equipment and procedures, looking at data for the previous three months. They focused particularly on locations, time slots and repetition.

Sarah said the results were not what she expected.

"I thought the audit would tell us that most falls happened in our social areas such as the dining room but it turned out many were in resident rooms," Sarah said.

"There was also a common theme around the times which were between 7-11am and 7-11pm," she said.

"The committee has taken immediate steps by getting new equipment such as sensor mats, fall crash mats, personal alarms and sensor beams.

"Other actions will be not so immediate but still very important."

Those actions include developing a flow chart on Falls Risk Assessment Tools (FRAT) and educating team members and carers on who should be kept informed.

"We are going to educate the team about what the risks are and we will run an audit on our equipment," Sarah said.

"That includes making sure we have the right equipment in place, make sure it's in good working order and ensure it is stored in specific areas."

Every resident who moves into Yarriambiack Lodge or Hopetoun campus is assessed for falls risk but Sarah believes the information could have been better utilised.

"Normally if someone has a fall, we contact the nurse in charge and the family but I want our physiotherapists to know what is going on as well," Sarah said.

"It will create more work for them but it's important they have an ongoing understanding of the current mobility of each resident," she said.

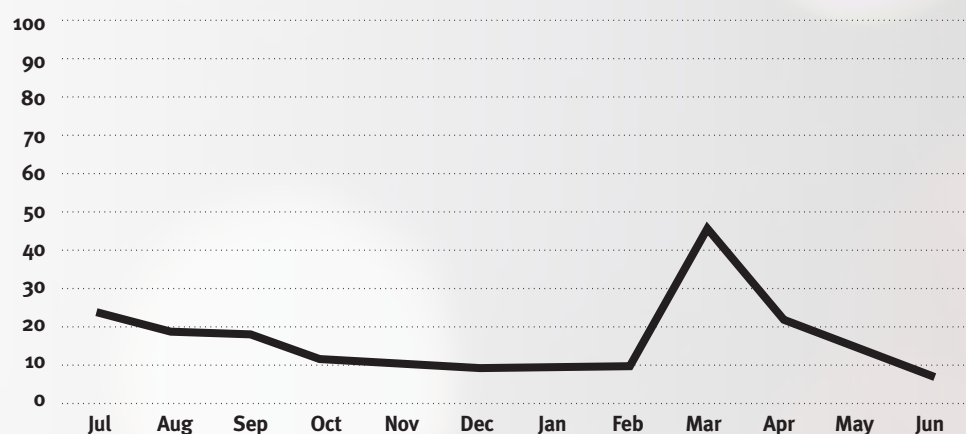
"There's a reason people fall and quite often it's a deterioration in mobility and they may not have the appropriate interventions in place.

"By working with the physios we can keep more interventions in place."

Sarah is also on a resolute campaign to review medications and minimise any prescriptions that cause drowsiness.

"While we are not able to control medications, we can certainly question the necessity of many of them," she said.

Falls - Yarriambiack Lodge 2017-18



Sarah Kleinitz shows Audrey how the laser beam alerts nursing staff to her movements.



RNH exercise physiologist Michael Pohlner takes exercise classes with Beulah mum Remy George and Alfred Mayall.

Feeling *fitter* in Beulah and Hopetoun

Community members in Hopetoun and Beulah are on a fitness regime through a new Rural Northwest Health program.

Those attending the chronic conditions exercise groups are already reporting they are losing weight and feeling better. RNH Community Health manager Ngareta Melgren said the exercise groups had filled an important gap in services.

“We had been getting requests through the Hopetoun Beulah Reference Group, that Beulah and Hopetoun residents were wanting more exercise groups,” Ms Melgren said.

“Fortunately, through the hard work of the team and the success of the wellbeing model, we were able to get back the funding we lost last year,” she said.

“The only proviso being that it was to be specifically used for diabetes and cardiovascular support.

“This married in perfectly with the community feedback of what Beulah and Hopetoun needed to help them live well at home.”

Ms Melgren said exercise physiologist Michael Pohlner was doing locum work at RNH when the funding was made available.

“We offered him the role of taking the exercise groups and he was very happy to be given the opportunity,” she said.

“Michael takes exercise groups in Hopetoun two days a week and one day a week in Beulah.

“His program includes general conditioning, cardiac/pulmonary rehab, better balance and strengthening.

“The classes have been so popular that we had to get a bigger gym and extra equipment in Hopetoun.”

Ms Melgren said the feedback from groups attending has been very supportive.

“Basically the program has found almost 30 new clients that we can now support with their wellbeing,” she said.

“We’ve received plenty of great compliments and people are finding they are losing weight and feeling better.”



Cruising to 90%

It was only a handful of years ago that almost half the team members at Rural Northwest Health did not immunize against the influenza strain.

Flu would be rampant among team members but many just didn't get around to having the needle or were not heeding the warnings. The figures were a major concern to our infection control nurse Maree Bell and it was fair to say, the immunisation program needed an injection.

The idea to improve those numbers pricked from a 2013 team forum convened by then CEO Catherine Morley. The plan was to have compulsory compliance sessions for all staff to keep up to date with changes to the health industry and to our health service.

During the four-hour sessions, team members were also told about the importance of vaccinating against the

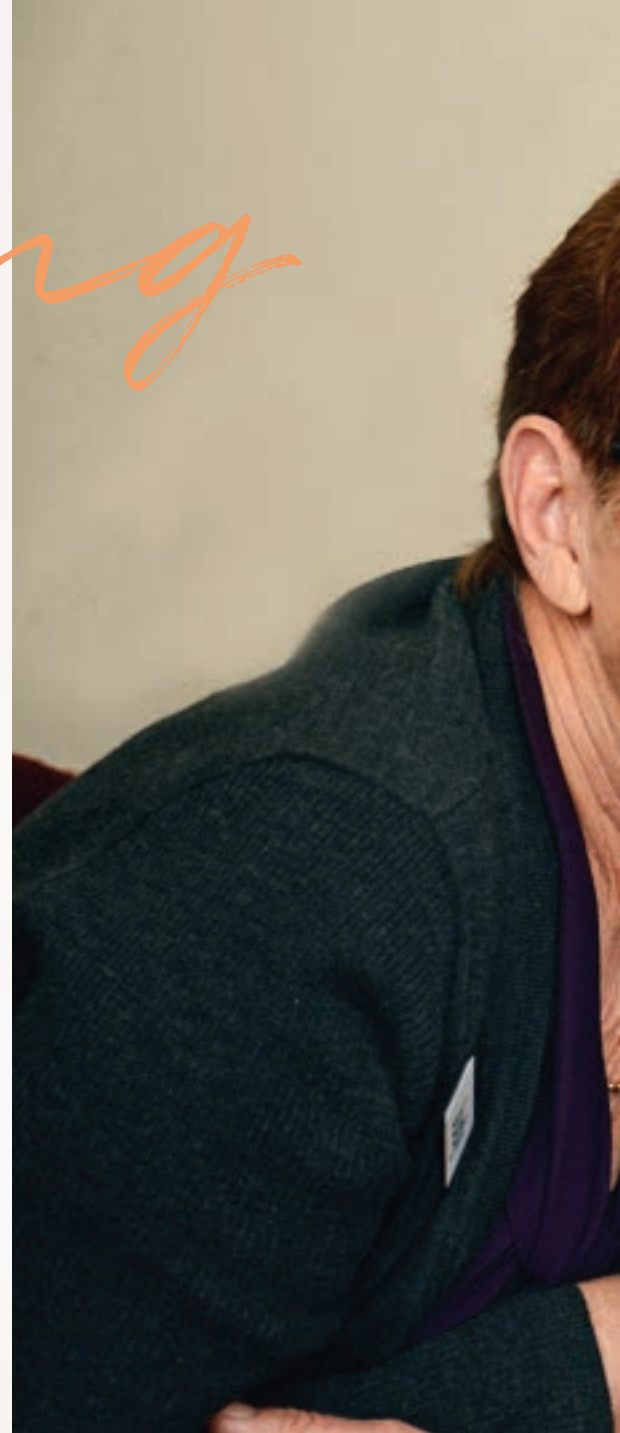
flu virus. It was also an opportunity for all team members to complete the statewide People Matters survey.

The first of these sessions was called the Compliance Cruise and to add an element of fun to the training, it was themed around a cruise ship experience.

The Compliance Cruise in 2014 was a major success with team members and the boost in flu vaccinations was instant and dramatic. The compliance sessions have become an annual event and most team members look forward to the antics of the over-dressed presenters and the room decorations.

Sessions since the Compliance Cruise have included the Staff Safari (2015), Staff Siesta (2016) and the Groove Train (2017). Each year the message around the importance of a flu vaccination has been drummed home in a variety of formats.

In the 2018 presentation, the theme was Wizard of Oz and fittingly, immunisation levels reached a magical figure of 91



Nurse Maryann Huebner administers a flu shot to colleague and brave lion Karen Miller. Karen was dressed as a lion as part of our Wizard of Oz training program.



Judy Ferguson with her mother in law Gladys.

percent with several team members taking the needle for the first time.

One such debutant was Hopetoun campus receptionist Judy Ferguson.

When Judy started her career at a doctor's surgery more than 30 years ago, her GP gave her a flu shot. Her bad reaction to the shot prompted the doctor to advise against future immunisations.

Judy heeded the advice but three decades later, as she sat through the team member compliance training year after year and listened to the strong argument for getting immunised, she would wonder if she needed to try again.

Judy said her first trigger for a change was when she was diagnosed a coeliac a few years ago which meant she had a low immunity.

"That got me thinking about trying the flu shot again but the game changer came last year when 10 residents reportedly died from influenza at a retirement village in Wangaratta," Judy said.

"Apparently many of the staff there had not been immunised which put the residents at risk," she said.

"Working in reception doesn't usually bring me in contact with the residents but now my mother-in-law has taken residency here.

"Working here all day and visiting her during my breaks would put her at risk and I didn't want that on my conscience so I chose to get vaccinated for the first time in more than three decades."

Judy said she had no reaction to the immunization.

"Obviously there's been enormous progress made with vaccinations since my last needle so I have no concern about doing it in the future," she said.

See Infection Control Report on Page 50

The team at Rural Northwest Health takes child safety seriously. They want to ensure all children feel safe and team members will report when there is a suspicion of any form of child abuse.

Warracknabeal campus manager – acute care Wendy James said RNH had a zero tolerance of child abuse.

“When it comes to child abuse, all allegations and safety concerns will be treated very seriously and consistently with our robust protocols,” Mrs James said.

“We have already implemented a number of changes to demonstrate our intent with child safety.”

Child safety is our

responsibility

Changes to RNH protocols include:

- Introduced a new code of conduct – which is signed by all team members on employment
- Developed a new Protocol called ‘Child Wellbeing and Safety procedure’, which provides clear guidance on appropriate conduct and behaviour as well as reporting obligations
- Appointed a child safety officer – a person who children can contact or be put in contact with to support them with their issue.
- All team members must have a current Working with Children Check
- Programmed education of team members which was provided during our Twist of Oz compliance education in May, 2018.



Dressed as Scarecrow, Warracknabeal acute campus manager Wendy James talks about child safety during Wizard of Oz team training.



Rural Northwest Health is renowned for its unique annual training program to keep all team members compliant with changes to health industry procedures and our own protocols. The theme for the 2018 training was a Twist of Oz. The program

was presented by, from top left, munchkin Kerry Seater, wizard Peter Miller, scarecrow Natalie Ladner (and Wendy James), Dorothy - Ngareta Melgren, and bottom, wicked witch Wendy Walters and tin man Jo Martin.

We have also based our governance, protocols and procedures around a document called 'Healthcare that counts- A framework for improving care for vulnerable children in Victorian health services'. This framework has been developed to support all Victorian health services to strengthen their response to vulnerable children and drive system-wide improvements to deliver coordinated and high quality care.

We know that children's health and wellbeing is harmed by events like family violence, child abuse and neglect. That is why identifying, protecting and supporting vulnerable children, their

families and carers is a priority for the Department of Health and Human Services and the Victorian Government.

All team members of Rural Northwest Health have legal and moral obligations to contact authorities when they are worried about a child's safety. Our aim is to have the right systems, processes and culture to prevent abuse and respond properly to allegations of abuse within the organisation.

Child safety is everyone's responsibility.

National recognition for a *team* effort

The outstanding partnership that has driven the YCHANGE program was recognised nationally by the Heart Foundation earlier this year.

The foundation declared Yarriambiack Shire winner of both the state and national awards. The recognition was the celebration of a well-orchestrated strategic process to improve the health of our shire.

Rural Northwest Health's strategic plan of 2016-20 included the implementation of a system geared to prevention as much as treatment and encouraging healthy lifestyles. This system was highlighted when we introduced the YCHANGE program with partners Yarriambiack Shire and Deakin University.

The catalyst for the program was Yarriambiack's unpleasant

labelling of 'Victoria's fattest shire'. The Victorian Population Health Survey 2012 highlighted the poor health profile of residents in Yarriambiack Shire. The shire experienced the highest prevalence of overweight and obesity and the highest per capita for sugar-sweetened beverage consumption of any shire in Victoria.

This prompted RNH support services manager Jo Martin to contact Deakin University to see if they could help change the sugar landscape. Soon research fellow Jill Whelan was on board to engineer the YCHANGE program and she was often joined by Dr Penny Love during monthly visits to Yarriambiack Shire.

Jill was adamant that the community needed to take ownership of the YCHANGE initiative and she surveyed them to unearth the issues they believed were behind the unhealthy score.

Hundreds of shire residents took part in surveys and community forums and with Yarriambiack Shire and Woodbine as regional



Celebrating the win are from left, back row, Deakin University researcher Lynne Miller, RNH Acting CEO and YCHANGE instigator Jo Martin. Deakin researcher Dr Penny Love, and front row, Heart Foundation active communities coordinator Lisa Speers, Rural Northwest Health Community Health nurse Julie Mills, Deakin University research fellow Jill Whelan who heads the YCHANGE project and Rural Northwest Health dietitian Ilana Jorgensen.

partners, Rural Northwest Health continued to play a major role throughout the process. Funding for YCHANGe ended in June, 2018, but much was achieved during its three years of support, including:

- Changes to catering provided at Council and Rural Northwest Health meetings
- Establishment of YarriYak café at Rural Northwest Health's Warracknabeal campus. The cafe sells 80% 'green' healthy coded items.
- A re-write of the kinder nutrition and active play policy, together with additional training and resources for parents and teachers
- Improving school canteen menu options
- Establishment of more Heart Foundation Walking groups and;
- A regular newspaper column across multiple outlets to raise awareness.

Under the YCHANGe banner, Rural Northwest Health also approached local sporting clubs with a 'fuelling your body' program. Rural Northwest Health provided a safe performance enhancing meal at training sessions along with education sessions and then monitored the effectiveness of the strategy.

In 2017, Warrack Eagles Football and Netball Club had seven evenings of healthy meals and education over seven weeks. The club adopted healthier food options after training sessions again in 2018.

Both footballers and netballers enjoyed the healthy meal options and most seemed to appreciate the education component as well. Players who attended the events said there was no resistance to the program and their team mates gained plenty of valuable dietary advice.

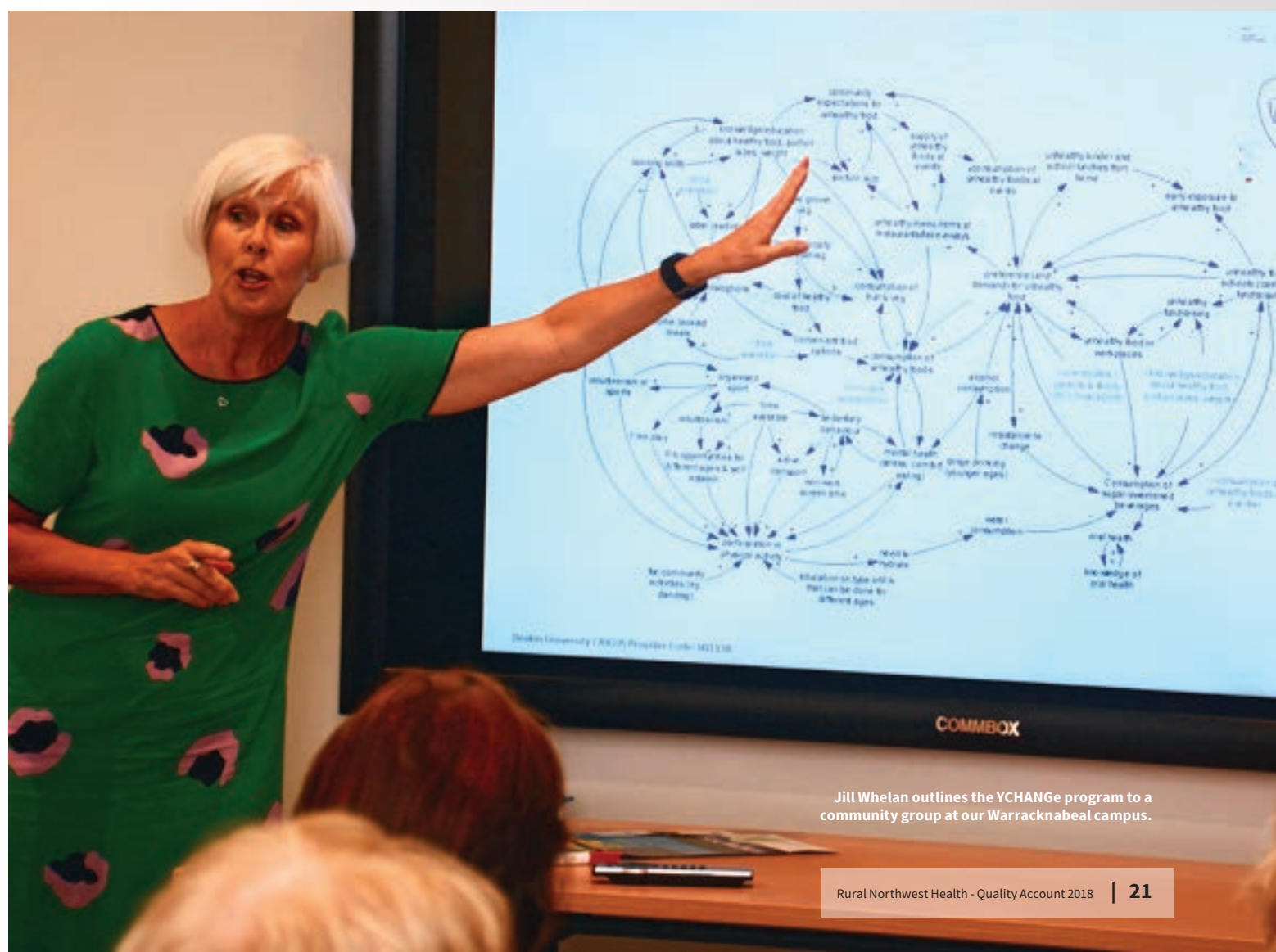
The biggest winner for Rural Northwest Health has been at its Warracknabeal campus where the YarriYak Café has thrived on a menu boasting 80 percent healthy choices. The café is managed by Warracknabeal disability service Woodbine with the support of RNH.

RNH Community Health manager Ngareta Melgren said there were rumblings from team members at the start of the program who objected to a healthy choices menu and particularly the loss of sugar drinks.

"Certainly we copped resistance early days but Woodbine CEO Bernie O'Connor, our then CEO Catherine Morley and I all remained focused on the goal of making healthy choices the easy choice," Ms Melgren said.

"Now it has become normal practice for almost everyone to purchase a healthy meal," she said.

"The outcome has produced only winners which is very pleasing for everyone involved, including Jill."



Jill Whelan outlines the YCHANGe program to a community group at our Warracknabeal campus.

Leave your life the *Best* way

Everyone wants to lead their life the way they want ... so they should also be able to leave their life with the same control.

Nobody wants to talk about dying but it's a conversation we all need to have. Rural Northwest Health wants every member of its community to complete an advance care directive - from the day they take control of their destiny - every community member.

There are many documented cases of dying patients who didn't worry about a plan for end of life care which caused much angst between family members and also with carers. There are also cases where the patient simply did not have a peaceful departure.

An advance care directive ensures your care will be provided as you have directed it to be and your final days will also be to your wishes. This story tells how an advance care directive ensured a 'good death'.

'Farmer Joe' was known in his remote Mallee community for being a down to earth bloke with the ability to repair anything. What you see is what you get.

He loved being outdoors with the sun on his face and that persistent Mallee breeze filtering past his weathered features. The majority of his retirement was spent tinkering in his shed where he just seemed to be able to do anything.

When Joe was in his early 70s, his partner became ill and passed away. Within a year or two, Joe was also diagnosed with terminal cancer.

While Joe was coming to terms with his news, RNH cancer resource nurse Kathleen Poulton entered his world. Kathy was there to support Joe any way that she could. Initially that was a cuppa and a chat and to make sure Joe was connecting with the right services and most suitable clinicians.

As she built a rapport with Joe, Kathy started hinting toward an advance care directive. She is a strong advocate for everyone having a plan and well qualified to discuss pros and cons after supporting her own father through his final days.

As the trust built in Joe's relationship with Kathy, so did his confidence and after only a few visits, he declared he was ready to complete the advance care directive.

Kathy said the directive was top priority at her next visit.

"Joe had accepted the need to complete the directive and he was ready to answer every single question," Kathy said.

"We had an in-depth conversation and there were a few laughs and a few tears," she said.

"When it came to choosing where Joe wanted to die, we came to a halt."

Joe had wanted to die at home in his remote community but there was no district nurse service available in that region. It was something that had not occurred to him and he needed time to

reconsider his options.

He and Kathy finished the session by taking a stroll around Joe's shed where she was quickly made aware of his talents at metal work. When Kathy returned a week later, it was immediately clear that Joe had put plenty of thought into his final days and knew exactly what he wanted.

"Joe told me he wanted to die at RNH's Hopetoun campus under the care of his local GP," she said.

"He also wanted to be outside with a nurse when he passed away and asked that his family not be there to see him die.

"His other important request was to have his favourite Engelbert Humperdinck song playing."

Joe's family were fully aware of his dying wishes.

As his time drew near, Joe was admitted into the acute ward of the Hopetoun campus. Before moving into the palliative unit, he had time to take a walk up to the main street.

When the time came for Joe, his every wish was made possible thanks to the attentive and committed team at the campus.

Joe was taken out onto the verandah of his unit where that warm Mallee breeze he had known so well was blowing gently on his face. He was given just enough medication to be pain free but was lucid enough to take in the melancholy tones of "There Goes My Everything".

A few minutes later, while his brother waited inside, Joe passed on.

For Kathy, Joe's final moments was a perfect departure.

"Every wish was met and Joe got the death he wanted," she said.

"In the end, Joe was no longer able to speak but he didn't have to because we already knew what he wanted.

"He knew it was possible to be taken outside and yes we could give him his music request.

"The nursing staff also knew what was special to Joe because he had made that clear in his Advance Care Directive as well. So even though he couldn't speak, they were able to talk to him about those special moments of his life."

Since Joe's death, Kathy has been able to support her own father in his final days because she had made sure he completed the Advance Care Directive.

"It is just so important for everyone to complete an Advance Care Directive so that both your medical carers and your family or loved ones are all on the same page," she said.

"If everyone understands your wishes, then there is no discontent and you can enjoy a peaceful departure."

Completion of Advance Care Directives for RNH clients

All aged care residents at both Warracknabeal and Hopetoun campuses have completed an advance care directive.

Our wellbeing coordinators and district nurses will always offer to help complete advance care directives with community members.

More than 25 percent of our district nursing clients have completed them while others are currently in the throes of doing so. All clients have been offered support to complete the form with a few refusing to take advantage of that offer.

If you or your family would like to complete an advance care directive, contact an RNH wellbeing coordinator on our free call line 1800 667 301.



Third time *deserved* for Kathy

A packed room paid homage to Rural Northwest Health wellbeing coordinator Kathleen Poulton after she was crowned the winner of the 2018 Betty Richardson award.



Kathy Poulton with her award and below, Betty Richardson finalists and team service award recipients.





RNH executive Dr Kaye Knight hosted the award evening.

RNH board members, team members and executive attended a special dinner with their families to see the Hopetoun nurse accept her award. She was one of five nominations for the prestigious award – they included Hopetoun nurse Gay Seebom, Hopetoun activities assistant Jodie Malcolm, Warracknabeal environmental services worker Leonie Cheney and Warracknabeal maintenance workers Heath McGrath and Jamie Horton.

Presenter and RNH executive member Kaye Knight said Mrs Poulton was a very worthy winner and a ‘stand out’ in a quality field.

“The standard of the entries was exceptional which is why we had five finalists this year,” Ms Knight said.

“Kathy’s entry was submitted by Community Health manager Ngareta Melgren and while all entrants ticked off the criteria boxes of having Betty’s qualities, Kathy’s went to another level,” she said.

“She is clearly devoted to her role and she was extremely supportive during what was a monumental shift from the type of service we had been rolling out previously.

“While others were trying to absorb the complexities of the wellbeing coordinator program, Kathy was running with it and helping everyone else along.”

Ms Knight said the judging panel included two community members and two board members and followed a strict criteria

that ensured the winner portrayed Betty Richardson principles in their work role.

“After being a finalist for the previous two awards, it was a fitting and popular win and Kathy has clearly deserved the recognition,” she said.

“It was also wonderful that the finalists came from variety of departments because it takes more than good nurses to run a quality health service.

“We have around 270 team members and they all contribute to our success.”

Service awards were also presented on the evening. The most significant badges were awarded to Warracknabeal wellbeing coordinator Anne Clark and quality officer Kerry Seater who have both landmarked 35 years of service.

Right behind them was RIPERN nurse Carol Miller who has clocked up 30 years and was clearly moved by the occasion. Carol spoke of the emotions a nurse can experience in a day at work when one moment you are holding the hand of a dying patient and the next it is the hand of a frightened young child who is uncertain of their surrounds.

Other service awards were presented to Rodney Sinclair for 25 years, Marilyn Clancy 20 years, Samantha Anderson 10 years, while Alison Fernandez, Nicole Christian, Lisa Thomas, Marlene Naylor and Val Parsons all received 15 year badges.



Acute nurses Jason Hay, Sorcha Flett and Coral Schmidt with a toy box donated by the ladies auxiliary, a result of the feedback lunches.

Share a meal and your thoughts

Rural Northwest Health seeks feedback in a variety of ways including surveys, consumer stories, compliments comments and complaints forms, social media and feedback lunches or morning teas.

A couple of years ago Rural Northwest Health introduced Warracknabeal acute feedback lunches and Community Health morning teas. These forums have proved invaluable to show Rural Northwest Health what is working and where we need to do better.

Acute feedback lunches include current and past acute patients who are invited to join the CEO, chair of the board of directors, Warracknabeal campus manager - Acute, the Acute nurse unit manager and an allied health team member, to dine in the boardroom.

The lunches are not structured and are very informal. Over a meal, the group get to know each other with general conversation and consumers have the opportunity to openly talk about their experience and raise any issues or suggestions relating to their experience of the quality and safety of the care they received.

Some of the improvements we have made as a direct result of

feedback received from these lunches include:

- Installation of a shade sail in the acute outdoor area
- Privacy curtains installed in all rooms
- Improved patient information booklet and a new patient information channel on TV
- Increased training for junior team members on making tea and coffee
- The fixing of patchy internet connections in the acute area
- Toys purchased for Urgent Care waiting area and a DVD/TV installed
- Outdoor play gym for children purchased for outdoor area

Currently in progress

- Fixing the step up in front of Urgent Care for easier trolley and wheelchair access
- Installing shelving/holders in showers to hold patient toiletries
- Investigating appropriate holders for patient information booklets to increase ease of access

Rural Northwest Health also obtains consumer feedback by participating in the Victorian Health Experience Survey (VHES) which is reported to the Department of Health and Human Services. The VHES questionnaire is sent to a random selection of people 16 years of age and over that have been admitted to our hospitals in the preceding month and seeks feedback on their experience. Any issues highlighted are placed onto an action plan for follow up by the most appropriate person or team.

RNH acute and community health clients wanting to attend a feedback lunch or detail your concerns, can contact community health manager Ngareta Melgren on 5396 1279 or acute nurse unit manager Jason Hay on 5396 1216.

Dedicated *gardens* for Hopetoun

Fresh new, dedicated gardens surrounding Rural Northwest Health's Hopetoun campus have provided a happier perspective for its aged care residents.

The completely redesigned garden area has allowed residents and team members to enjoy greater access around the perimeter. The extension of fences and a new concrete path allows both ambulant and wheelchair-bound residents to circumnavigate the campus and take in the assortment of colourful gardens along the way.

The gardens were made possible by a \$30,000 contribution from Rural Northwest Health along with donations from other organisations, including a \$3000 grant from Hopetoun Women on Farms Gathering. The key motivators behind the garden project have been Hopetoun environmental services worker Tracie Love and wellbeing coordinator Kathy Poulton. The pair, along with administrator Judy Ferguson have also worked tirelessly to prepare garden beds.

Tracie had ignited the program in October 2016, after appealing for support to improve the campus gardens. Tracie wanted her father, a resident at the time, to have a picturesque outlook from his room with a personalised garden.

Unfortunately her father passed away but Tracie was determined to see the project come to fruition so other residents could reap the rewards. Kathy Poulton said the idea of the project was to allow each resident to design the view from their individual room.

"Outside each resident's window is an individual garden bed where

the resident can choose what plants they want and they can add ornaments and features that create the best memories for them," Kathy said.

"One lady put a table and chairs outside her window so she can sit and enjoy the garden," she said.

"It's just another way of ensuring this is home for our residents."

Rural Northwest Health Hopetoun campus manager Natalie Ladner thanked everyone for ensuring the success of the project.

"The contribution from our own board was enormous and Women on Farms have been great," Ms Ladner said.

"But we have also had wonderful support from Hopetoun Campus Ladies Auxiliary, Hopetoun Garden Club, Hopetoun Opportunity Shop and Hopetoun Mens Shed who built a telephone box for the garden," she said.

"The work from our own team members has been outstanding."

The campus now employs a gardener one day a week to help with garden maintenance after receiving feedback from resident and family members. Some residents were finding it a little overwhelming to maintain their own little patch while volunteers looking after sections of garden also found the workload difficult at times.



Secret men's business

Sshhh! It's a secret.

I can only tell you so much of this story because it's supposed to be a surprise.

In the early hours of the third Friday of every month, the Rural Northwest Health Day Program bus drives around Warracknabeal and collects elderly men from their homes.

Not just any men. This is a group of men who don't normally venture out that much. But they all look forward to their monthly secret sojourn.

It's called "secret men's business" and that's exactly what it is. Organiser Jenny McGrath has worked with Rural Northwest Health Day Program (PAG) clients for several years, regularly taking them on outings. But Jenny said this was slightly different.

"Secret Men's Business is for those men who don't normally attend Day Program but for some of them this would be their only monthly outing," Jenny said.

"It's secret because we never tell them where we are going," she said.

"After we pick them all up, we head back to the community room at RNH for morning tea, then we hit the road."

The secret bus trips have visited many fascinating locations across the region including Lake Charlegrark, Grampians and Lake Bellfield, Wyperfeld National Park, Nhill Aerodrome, the Pickers Market in Stawell, Horsham's wineries, Olde Dadswells Town, Melville Caves near Logan, the Dogwood Track, Geodetic Road and the museum at Wycheproof.

Jenny and Day Program team leader Tony Wagenknecht are the regular guides for the special trips but she has also taken Beulah day group's Sue Forsyth and nurse Katrina Rosser.

"There' usually 10 or 12 men that make the trips and they always enjoy themselves," she said.

"They love being together, talking and enjoying each other's company."

Jenny said the program provided an important social connection for the men.

"Trips like these are great for the health and wellbeing of these men and they really enjoy learning from the places they visit.

"They particularly enjoy anything with historical significance, like the Melville Caves which were once a haven for bushrangers."

The fee for a secret men's business bus trip is just \$4 plus the cost of lunch and any possible admission fee. If you would like to become involved, contact Jenny or Tony on 5396 1200, during office hours, Tuesdays to Thursdays.



Ken Bibby gets on the bus



On the bus and ready for the next adventure.



Jenny McGrath sees Bob Fisher off the bus.





Left: Graeme Funcke speaks to the packed room.

Ngareta Melgren outlines the wellbeing design.



Health forum opens *navigation* pathway



A packed crowd at a Rural Northwest Health community forum early this year, gained a greater understanding of the service's Wellbeing model of care and its relationship with My Aged Care.

Around 50 people filled the Warracknabeal campus meeting room in January, to hear speakers explaining the program and to get answers to their concerns. Sheep Hills resident Graeme Funcke shared with the crowd how helpful he found the wellbeing coordinator support.

Mr Funcke said everything was organised for him, right down to getting help with carrying his groceries.

"The wellbeing coordinators do just that – they coordinate," Mr Funcke said.

"They coordinate everything for you so you don't have to worry at all," he said.

"It's a very simple system and everyone should use it."



Community Health manager Ngareta Melgren initiated the forum after hearing of a few people in the community whom were struggling to understand the workings of the new model of care.

Mrs Melgren said the forum went extremely well.

“We were able to provide a lot of answers for people about their specific concerns,” Mrs Melgren said.

“It seemed the majority of the concern was around how My Aged Care came into play with some of our services at Rural Northwest Health,” she said.

“For some, it is hard to get an understanding around who they have to see first and how many times they are required to provide the same information.

“The important thing to remember is that My Aged Care is a completely separate system to Rural Northwest Health.

“However the wellbeing team can still support you through the My Aged Care process.”

Ms Melgren said the wellbeing coordinator program had two basic

principles for the community to adopt.

“The bottom line for the system is simply, if you need support, contact the wellbeing team and they will begin the path to wellness for you,” she said.

“If you are running into problems with our processes and systems, then contact me directly.

“That way we can continue to improve how we do things to make it better for our community.”

The Wellbeing Coordinator model of care was introduced in July, 2017. It has received strong community support from the beginning.

“The number of great outcomes from people utilising the wellbeing coordinators to improve their health and live well has been enormous,” Ms Melgren said.

“It’s been a wonderful initiative and is achieving its goal of helping people to live well in their homes.”



Safe work for Sharon

If a team member at one of our campuses notices an area for improvement they are able to take action easily through an efficient reporting process known as OFI (Opportunity for Improvement) Compliments, Comments and Complaints.

Our campuses receive many suggestions each year through this computer-generated process. Team members might notice an issue that affects a resident or client - or it could be something that concerns their own wellbeing.

Many of the issues require minor tweaks to ensure the best outcome but occasionally the change can be more significant. One such change that occurred last year resulted from the storage of the printer cartridges for the front reception photocopier at our Warracknabeal campus.

Cartridges on an industrial photocopier are quite cumbersome and heavy. These particular

cartridges were stored on top of cupboards in the photocopier room. Receptionist Sharon Watts strained a muscle in her shoulder trying to reach up for a cartridge and her shoulder has continued to give her problems.

She reported the incident using the VIHMS procedure and it was acted upon immediately. The decision was made to create storage space down low for the cartridges. The only available space was where the office safe stood.

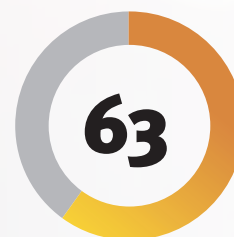
The maintenance team shifted the lead safe into the medical records office where there was a nice little nook for it to fit. Sharon said she was pleased with the outcome and was appreciative of the swift efficiency with which it was handled.

"I just had to report the incident and within a day or two, the cartridges had a new home and I didn't have to worry about further injury," Sharon said.

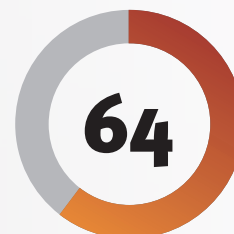
"It was a good outcome all round."

The below numbers are for the period July 2017-June 2018

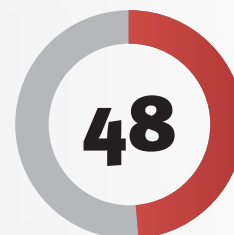
COMPLIMENTS



SUGGESTIONS



COMPLAINTS



Two new homes for Hopetoun

Rural Northwest Health is building two new homes in Hopetoun to help attract nursing staff to the region.

Hopetoun campus manager Natalie Ladner said the modular homes would be utilised by team members working at the campus.

“Accommodation is constantly needed for graduate nurses, students and single team members working at Hopetoun,” Ms Ladner said.

“Having new homes available will make it a lot easier to attract qualified nurses to the town and more importantly it will help retain them,” she said.

“Recruiting qualified clinicians to the region is never easy but it’s much more attractive to someone if you are offering them brand new accommodation.”

RNH support services manager Jo Martin is heading the project.

Ms Martin said the homes were an important addition to the organisation and the board of management had recognised this immediately.

“The board has demonstrated its commitment to the Hopetoun campus with this significant investment,” Ms Martin said.

“Previously our resident nurses were staying in a four-bedroom facility behind the doctors surgery,” she said.

“The facility had serious structural issues that we needed to address and the cost of repairing was significant enough for us to look at replacement homes.

“The modular homes will both have two bedrooms and two bathrooms with open kitchen and family room plans.”

Ms Martin said a feasibility study had taken place prior to purchasing the homes.

“We investigated the options thoroughly and formed a working group to gain opinion on the most sensible approach to providing accommodation,” she said.

“The group included community members and team members who were already using accommodation in Hopetoun.

“That panel recently chose a location for the homes which will be on RNH land on the Henty Highway.”



The panel who chose the appropriate location for the homes include from left project manager Jo Martin, Hopetoun maintenance officer Bill Wright, RNH Maintenance manager Peter Cox, Beulah Reference Group member Ross Cook and Barb Hallam, recently recruited nurses Kartika Subagio and Arun Chathamparambilramesan, and Hopetoun campus manager Natalie Ladner.



Perfect scores in accreditation

Rural Northwest Health team members celebrated another seemingly flawless accreditation in July, 2017.

Yarriambiack Lodge was accredited for 44 national standards and auditors have recommended approval for every single standard. This comes on the back of a recently assessed full recommendation for the acute team at both Hopetoun and Warracknabeal campuses.

Rural Northwest Health's then CEO Catherine Morley said the result was a wonderful team effort.

"Our aged care campus manager Wendy Walters and Yarriambiack Lodge nurse unit manager Irene Perry put a lot of time and effort toward getting this outcome," Ms Morley said.

"But it takes the entire team working toward the same result which is making our residents feel comfortable and happy while looking after their health," she said.

"When everyone is on the same page, this is a lot easier to achieve."

Ms Morley said the National Standards assessors spoke with managers, board members, team members, residents and their family members as part of the accreditation process.

"There was plenty of great feedback but one particular comment brought it home for us," she said.

"A family member told the assessors how mum was 'blossoming since she moved in' to Yarriambiack Lodge.

"She wouldn't go to the letterbox when she lived at home but now she is out and about all the time."

While thanking everyone involved at the announcement of the accreditation results, Ms Walters paid special tribute to Mrs Perry who retired the next month.

Acute

Acute unit team members at Warracknabeal and Hopetoun were also celebrating after Australian Council on Healthcare Standards surveyors announced they would recommend to the council that Rural Northwest Health be re-accredited. Surveyors Dr Margaret Sanger and Sally Percy visited both campuses during July, 2017



RNH team celebrates accreditation success.

where they met with team members and reviewed documentation from all departments.

Dr Sanger said there was not much for which the survey team could be critical in any way.

“We were impressed by a number of safety and quality initiatives that Rural Northwest Health has implemented,” Dr Sanger said.

“I’m also very impressed with how the organisation engages with its community members,” she said.

“Especially how Rural Northwest Health keeps them informed of what they are doing and seeks their opinions on their programs.”

Ms Morley said the result was a pat on the back for all departments.

“This is not just about the great care received in acute but the overall service from all departments including administration and environmental services,” Ms Morley said.

“The surveyors reviewed protocols, audits, reports, minutes and training schedules,” she said.

“They also gave us a couple of opportunities to improve which we

embraced.”

Ms Morley said team members stepped up and took responsibility for certain standards.

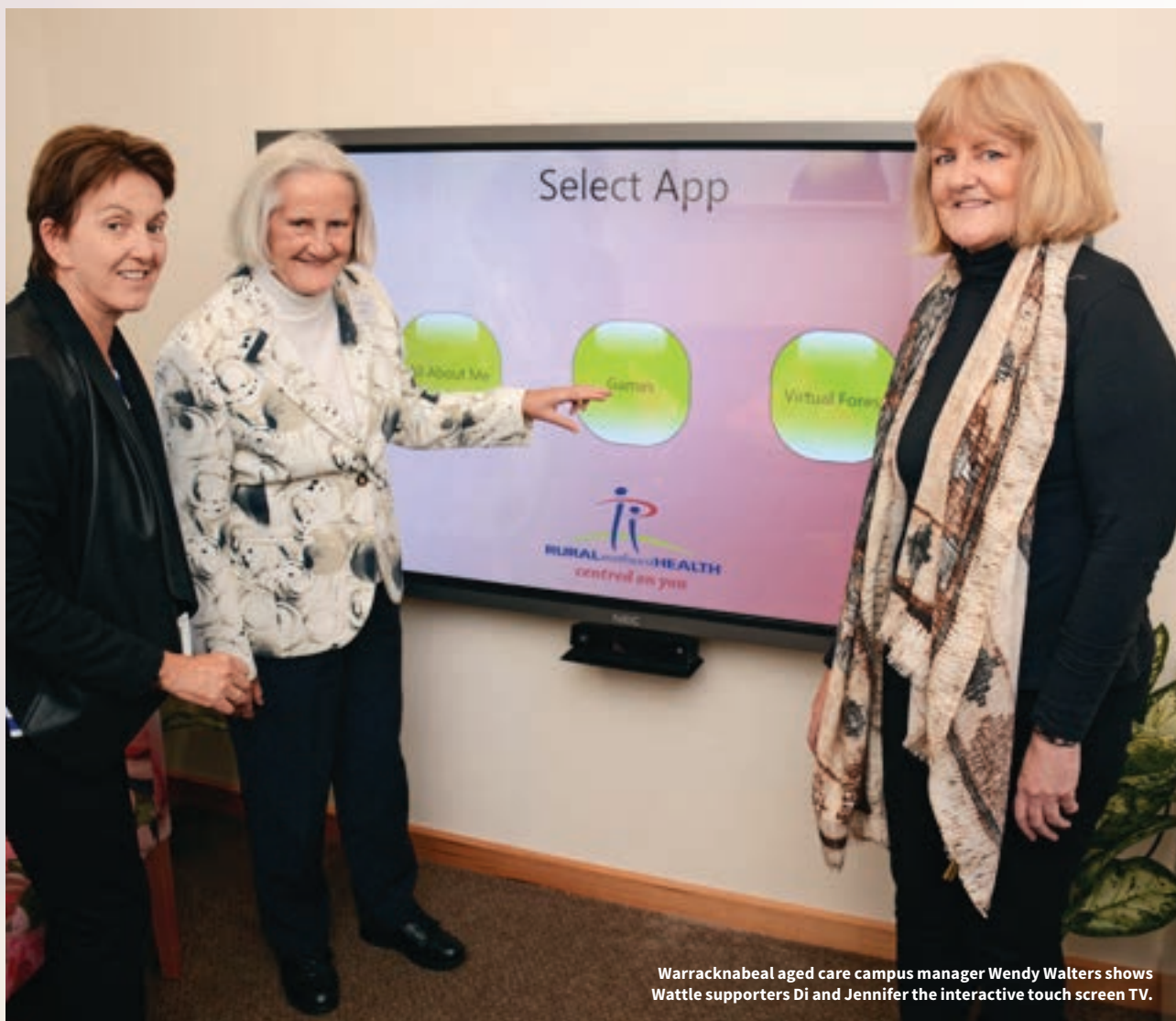
There’s a lot of people to thank both at Hopetoun and Warracknabeal and at board level,” she said.

“But there were also community members such as Peter McDermott, Wendy Hewitt and Barb Hallam who provided their thoughts on how we engage and empower the community.

“They were wonderful and their input was important.”

Ms Morley said one of the comments that stood out from the surveyors was that teamwork was evident and that every role was important to ensure that we provided high quality and safe services and that as an organisation we valued every role.

Refreshed for *interaction*



Warracknabeal aged care campus manager Wendy Walters shows Wattle supporters Di and Jennifer the interactive touch screen TV.

It doesn't seem that long ago that Rural Northwest Health declared open its new building for aged care services, which heralded the birth of Yarriambiack Lodge.

A decade of dedicated care has passed since however and what was once state of the art was beginning to wither. Warracknabeal campus manager – aged care Wendy Walters said while the building was in great shape, the décor was starting to look tired.

“The Banksia wing is still new because it was only built three years ago but the rest of Yarriambiack Lodge needed a coat of paint and a fresh look,” Ms Walters said.

“So rather than just getting it repainted, we invited residents, their

family members and our own team members to make suggestions as to how we could improve the décor,” she said.

“We organised a planning day with everyone involved and some great ideas came from that.”

RNH's own painter Jamie Horton took control of applying a fresh look to the interior that included vibrant feature walls. Striking new artwork featuring native birds and other fauna adorns the walls along Heath Street while the Honey Myrtle passage displays a series of 'before and after' streetscape photos of Warracknabeal.

Other additions include new furniture and a Sonos wireless sound system so residents can choose the music they would like to hear played exclusive to their location.

The award winning Wattle Crescent received the biggest makeover with increased support from donations to top up the financial investment from RNH.

Ms Walters said the generosity from residents' family members made a big difference to the finished result.

"Wattle is now a redecorated and rejuvenated area complete with interactive wall spaces and a new touch screen television," she said.

"The giant screen has resident stories depicted in pictures and interactive games as well as a virtual forest that is also interactive.

"Each Wattle resident has their own individual door design to the entrance of their room as well as a letterbox to help them feel at home."

Ms Walters said the reaction from everyone to the changes had been very positive.

"The residents and their family members are really enjoying the new spaces."

Future plans for Wattle Crescent include an interactive farmyard complete with small tractor and live pets.



Wattle memory support nurses Jacqueline Johnston and Katie Ramsdale cut a celebratory cake to mark the opening of the refurbished memory support unit.



Memory support nurses Ange Muller and Jacqueline Johnston with resident family representatives Kerry McDonald and Karen Croser and Wattle team member Karen Vo, discuss ideas for the refurbished Wattle.

World wants to *know* about Wattle



RNH maintenance worker Jamie Horton paints the walls in Yarriambiack Lodge.

Rural Northwest Health receives recognition nationwide and worldwide for its innovative ABLE model of person-centred care.

The ABLE model, conceived and developed by Rural Northwest Health campus manager – aged care Wendy Walters, is designed to improve the lives of RNH residents living with dementia. It is primarily utilised in the Wattle Crescent unit of the Warracknabeal campus' aged care facility Yarriambiack Lodge but elements of the model are also adopted throughout the lodge and at the Hopetoun campus.

RNH memory support nurse Katie Ramsdale also utilises the model to work closely with the community to help keep people with early signs of dementia, safe at home.

Ms Walters and fellow RNH executives are regularly invited to present the ABLE model at national and international health forums in America, China and Italy. She receives many requests from aged care facilities across Australia who want to learn more about the achievements of life improvements in Warracknabeal.

The award-winning ABLE model was developed in 2011 and focuses on (A) Abilities and capabilities of the resident; (B) Background of the resident; (L) Leadership, organisational culture change and education; (E) Physical environment changes. It provides a supportive environment where specially trained staff assist residents to undertake meaningful activities and social roles that reflected each of their individual interests and skills.

The aim is to help extend and retain



Pictured discussing planning ideas for Wattle Crescent are nurse Greg Bourke, aged care campus manager Wendy Walters, Yarriambiack Lodge nurse unit manager Sarah Kleinitz, memory support nurse Katie Ramsdale, resident Marj McKenzie, nurses Helen Brindle and Wendy Kingdon and nationally renowned dementia guru Anne Kelly.

residents' abilities and maximise their quality of life. Activities are modified for each resident to ensure they succeed.

Daily activities include drying dishes, helping make beds, folding serviettes and setting the dining tables, gardening, ironing, polishing shoes and making tea and coffee.

Environmental changes such as interactive wall murals, make the unit less hospital-like and more homely to support memory and enhance abilities. Residents are encouraged to choose their meals from a servery in the dining room and the outside garden has

become an extended living space with a pergola, a shed with tools and an old car, a chicken coop, raised garden beds, seating and a barbecue. The next project for Ms Walters is to develop a farmyard area with a tractor included.

* A YouTube video presentation on Wattle Crescent has received more than 27,000 views since it was posted a few years ago. To find out more about the ABLE model go to www.rnh.net.au or watch the YouTube link <https://www.youtube.com/watch?v=1LCRrcxlxE&t=271s>



Acting CEO Craig Wilding, right, shows Wattle supporters Jennifer and Di one of the interactive walls during the official opening of the renovations in May, 2018.



RNH exercise physiologist Britenie Power takes Sue Adams of Warracknabeal through the cardiology rehabilitation program.

Heart patients *helped* by Flying Doctor



Rural Northwest Health is one of five remote Victorian health services to benefit from a new cardiology telehealth service.

The Royal Flying Doctor Service launched the service linking remote and regional patients with cardiologists.

The cardiology telehealth service uses a video conference system so Rural Northwest Health heart patients can consult with a cardiologist without travelling to Melbourne or Ballarat.

The system is secure and easy to use and like other telehealth services, it allows the patient to see and hear the specialist from the comfort of a Rural Northwest Health consulting room or doctor's surgery.

RFDS Victoria chief executive Scott Chapman said the cardiology telehealth service resulted after the success of the diabetes telehealth service.

"RFDS Victoria has delivered a diabetes telehealth service since November 2013, connecting diabetes patients in rural Victorian communities with endocrinologists in Melbourne," Mr Chapman said.

"In this time, more than 1000 appointments have been conducted with patients who may otherwise not see a specialist," he said.

"The cardiology telehealth service is being rolled out in Victoria and may be expanded to other states across Australia."

The cardiology telehealth service also ensures high security for document sharing between doctor and patient.

Rural Northwest Health clinicians also utilize telehealth to keep cardiovascular patients up to date with dietary and heart information.

RNH exercise physiologist Britenie Power and dietitian Ilana Jorgensen provide cardio rehab sessions for heart patients.

The sessions include a variety of exercise programs and dietary advice to ensure clients are getting back to good health. The end of each session includes a telehealth link up with other health services to discuss programs and provide support.





Wellbeing coordinator
Kathy Poulton
demonstrates the holter
monitor to Daniel Griffiths.

Heart help at *home*

Rural Northwest Health cardiovascular patients can now be monitored from home through a new free service.

RNH has purchased a holter monitor to record heart activity for cardio patients who don't need hospitalisation. The holter monitor is a battery-operated portable ECG that measures and records your heart's activity.

It can record continuously for a 24-hour period or longer depending on the type of monitoring needed.

RNH community health manager Ngareta Melgren said the holter monitor was proving an invaluable tool for remote patients.

"Unfortunately there is a high percentage of cardiovascular disease in our region so this device is an important asset," Ms Melgren said.

"Instead of clients travelling to Horsham so their heart activity can be recorded for 24 hours, they can simply be monitored from home," she said.

"Our wellbeing coordinators can connect the client to the holter monitor and they can relax at home instead.

"The digital information from the device is then transferred to Ballarat Health Service's cardiology unit.

"They interpret the results and forward the details to the patient's GP."

Ms Melgren said the holter monitor was a winner all round.

"Not only is it a free service to the client but they don't have the burden of travel either," she said.

"The holter monitor has been so effective since we started using it in September, 2017, that we are now looking to buy a second one.

The region's heart patients can find out more about the holter monitor by talking to their GP or contacting our Wellbeing Coordinators on 1800 667 301.

Students *Become* the teachers



A new interactive program between Warracknabeal's St Mary's Primary School and Rural Northwest Health is proving a winner for both partners.

Each Thursday, under the accompaniment of their principal Joy Quarrell, a group of students from the school visit Wattle Crescent to interact with the residents. Wattle Crescent is Yarriambiack Lodge's award-winning memory support unit for people living with dementia.

The students usually pair up with the same residents to ensure continuity and form a direct relationship. They will often sit and talk with the resident or enjoy a supper with them. Sometimes they will read to their chosen resident or they will show them how the new interactive, touch screen, giant TV screen works.

Warracknabeal campus manager for aged care Wendy Walters said the program was proving a success.

"We don't have any officially recorded data on the program as yet but I can tell you the residents thoroughly enjoy their chance to chat with the young students," Ms Walters said.

"The students look forward to their visits and enjoy the companionship that's created," she said.

"They seem to get a kick out of showing the residents how to use modern technology such as the interactive touch screen TV.

"It has been a wonderful program and we are happy to see it continue."





Combating *unwanted* weight loss



Hopetoun nurses Gay Seebohm and Debra Sommers take Roma through the unplanned weight loss program.

The aged care team at our Hopetoun campus use a Resident of the Week program to identify unplanned weight loss among residents.

There is substantial evidence and research that demonstrates unplanned weight loss is significant among older people living in residential aged care. Residents with unplanned weight loss experience problems associated with malnutrition and may also suffer from associated issues such as poor wound healing, pain and discomfort, reduced physical function and even death.

Unplanned weight loss occurs among older people for many reasons, including behaviours linked to dementia, such as:

- Inability to recognise food,
- Forgetting to eat,
- Inability to feed themselves,
- Polypharmacy,
- Age-related changes such as loss of taste, smell, sight and swallowing difficulties,
- Depression,
- Chronic disease and,
- Social isolation.

The adverse events and harm associated with unplanned weight loss can include death, increased risk of hip fractures, pressure injury development, poor wound healing, and malnutrition.

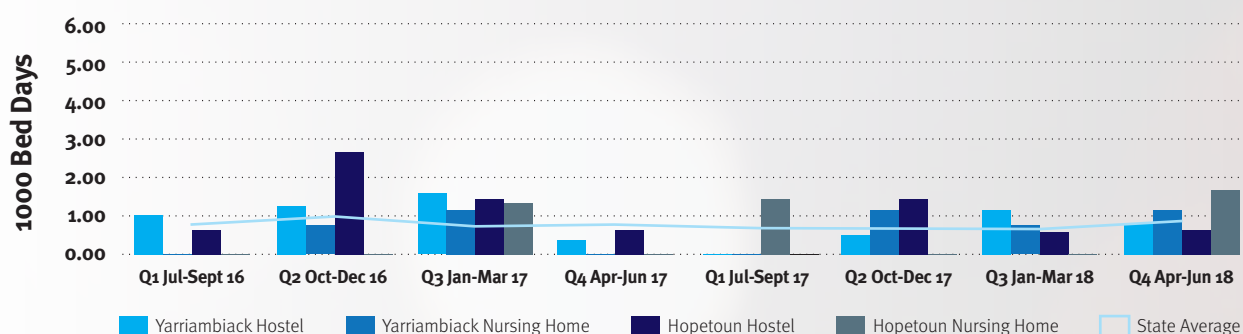
Unplanned weight loss is measured as anything more than 3kg over the reporting period. Once a resident has been identified as losing weight, the aged care team will discuss the possible reasons behind it.

These could include a new diuretic, palliative phase, or a re-weigh may be needed. The team then activate a 24-hour food monitoring chart which will be discussed again the following day and referred to the RNH dietitian. Other referrals may include a speech pathologist and GP.

The team will also adopt strategies such as supplements, dietary changes and modified diets. The resident will be encouraged to eat in the dining room for social interaction.

The graph below shows we are aligned to state averages with unplanned weight loss.

Aged Care Unplanned Weight Loss 2016-17 > 2017/18



Scoring *high* with our team

Rural Northwest Health has a proud record of team response and feedback to their work and management.

Feedback is made available annually through the People Matter Survey. This is a public sector employee opinion survey run by the Victorian Public Sector Commission.

The survey gives employees the opportunity to express their views on how shared public sector values and employment principles are demonstrated within the organisation by colleagues, managers and senior leaders. The survey also measures the level of team member engagement and job satisfaction.

All Health services, Victorian Public Service departments, Victoria Police and VPSC are mandated to participate annually.

While health services across Victoria request their team to complete the survey, generally the response is minimal. Rural Northwest Health's acting CEO from May, 2018, Craig Wilding has been more than impressed with the regularly high participation rate in the survey from the RNH team.

Mr Wilding said the Victorian Government's target for response to PMS was 30 percent with many agencies struggling to achieve that result.

"The response rate at RNH is a massive 79 percent which is outstanding really," he said.

"More importantly, the highest scoring results were positive and focused around our acceptance for team equality.

"RNH has a strong emphasis on accepting and working with team members from diverse backgrounds and this is promoted heavily through our own diversity group committee."

Mr Wilding said our PMS also scored high for its patient safety culture.

"The target for this is 80 percent and our results were all in the mid to high 90s which is incredible," he said.

"It's a great reflection on the management and everyone working in the organisation."

Once the results were published, Mr Wilding and RNH education and research manager Kaye Knight have been meeting with representatives from various departments to create an action plan around areas that needed improving.

The action plan will be implemented during the next 12 months.



Acting CEO at the time, Craig Wilding discusses an action plan with acute team members.

Bree's *return* is a welcome one

Our newly appointed clinical support nurse already has a strong connection with Rural Northwest Health and our community.

Bree Stonehouse is a born and bred Warracknabeal girl and began her nursing career at RNH as a trainee enrolled nurse. After her training, Bree travelled all over the country, working at different hospitals until she settled in Horsham with her husband and started raising a family.

Bree said she was excited about her new career role with RNH and was happy to be based at the Warracknabeal campus where both her father Rod and sister Maddie also work.

Bree's role includes supporting, guiding and organising the students who train or are on placement at our facility, the graduate Registered Nurses and all team members on the floor.

"I'm here to help them with skills, educate them and support them if they need any help or advice," Bree said.

Rural Northwest Health education and research manager Dr Kaye Knight said Bree

had fitted into the role well.

"Bree is passionate about her work and she is doing a great job," Dr Knight said.

"The nurses enjoy training with her and it's great to have a familiar face back in our organisation because it is a common trend to lose our home-grown nurses to the city."



Breanna Stonehouse, right, watches student nurses help resident John.

Adverse events and *serious* incidents

An adverse event is an incident that results in harm to a patient.

Adverse events commonly experienced in hospitals by patients over 70 include falls, medication errors, malnutrition, incontinence, hospital-acquired pressure injuries and infections.

Older people are particularly vulnerable to experiencing adverse events due to the complexity in managing their care and a decline in their physiological reserves. Approximately three in four older adults have extra complex conditions on top of their presenting condition while one in two older people take over four medications.

Approximately one in 20 patients experience an adverse event while in hospital. Patients with adverse events stay about 10 days longer and have more than seven times the risk of an in-hospital death than those without complications.

For these reasons Rural Northwest Health monitors all serious incidents and adverse events very closely.

In the past 12 months there have been 10 serious incidents reported of which half related to falls. Two of the incidents related to documentation issues, one was a transfer delay by the receiving hospital, one was a code blue procedure and one a mandatory reporting of suspected elder abuse of a community client.



Plotting for *support*

Despite a slow gestational period, Hopetoun's community garden is blooming into something special.

The garden was first suggested during a Rural Northwest Health Community Action Group meeting a few years ago. A plot on Rural Northwest Health land was allocated for the garden but its establishment was prolonged before it could finally take hold – and that was mainly thanks to one very enthusiastic community member.

With support from partner Anita, Hopetoun builder Paul Fischer built the garden infrastructure that includes an impressive gazebo and several raised boxes. He has also completed a fence so young children can roam and play in the garden while protected from the road.

VCAL students from Hopetoun P-12 College have helped Mr Fischer with building while his sister Irene Kelly has also worked with him on laborious chores like spreading bark. Mr Fischer donated many hours of labour as well as recycled material to keep the garden financially viable.

While he was keen to build various components, his talents stopped there.

"I'm a builder, not a gardener," Mr Fischer said.

"I was happy to look after the building aspect because that's my area of expertise but when it comes to gardening, I don't have much idea," he said.

"I'll leave that up to the green thumbs and those with more passion for planting than what I have."

Rural Northwest Health administration team leader Cheryl Reid has also been getting a little dirt on her hands, helping out with construction. Other local helpers have involved themselves by pruning fruit trees that have been planted in the garden.



Paul Fischer checks the garden's progress with community volunteers Anita Mayer and Beth Kidman

District nursing *reaches* further north



Hopetoun district nurse Kristy Toohey returns from a home visit.

Community members in the further northern reaches of Rural Northwest Health's catchment area are now able to access better care at home.

RNH's Hopetoun campus has added to its district nursing team with increased hours of service to cover more communities in its district. RNH now provides a district nursing service to the Patchewollock community which was previously supported by Mallee Track Health Service.

RNH's Hopetoun campus manager Natalie Ladner said the funding of additional hours was recognition for what her team had been able to achieve.

"As a remote team, we provide a very important service with difficulties not experienced by bigger centres," Ms Ladner said.

"Remoteness and distance between services is a problem we deal with every day," she said.

"Being able to support communities like Patchewollock is very important to us and our nurses do a great job.

"In many ways, they are a conduit to these communities and their work is just as important socially as it is health-wise."

The Hopetoun campus regularly promotes its various services including district nursing and allied health services in the town's popular newspaper the Hopetoun Courier. Services are also featured on the website www.rnh.net.au



Helping you live well

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Contact a Wellbeing Coordinator today



E: livewell@rnh.net.au

Ph: 1800 667 301

Infection control report

Staphylococcus Aureus Bacteraemia (Infection)

Staphylococcus aureus is the most common cause of blood stream infections, capable of causing significant illness and/or death.

All healthcare facilities are required to monitor and report these blood stream infections. This infection can be obtained either during a healthcare admission or from home.

Rural Northwest Health had no Staphylococcus aureus infections (or bacteraemia) during 2017/18.

Use Of Antibiotics

One way health services audit the use of antibiotics in their facility is to participate in the National Antimicrobial Prescribing survey. It provides valuable information on the appropriate use of antimicrobial drugs within Australia and is endorsed by the Australian Commission on Safety and Quality in Health Care.

Antimicrobial stewardship programs have been developed to reduce inappropriate and unnecessary use of antibiotics and assist in slowing the progression of antimicrobial resistance.

Rural Northwest Health has a committee (Clinical Advisory Committee) which reviews the results to determine prescribing trends, identify targets for quality improvement and assists in the evaluation of any changes that are implemented.

Appropriateness of antibiotics

The most common reason for admissions to Rural Northwest Health's acute units in 2017 was for community acquired pneumonia and every patient was treated with the appropriate antibiotics for that condition. This was also the case for the second most common presentation of non-surgical wounds.

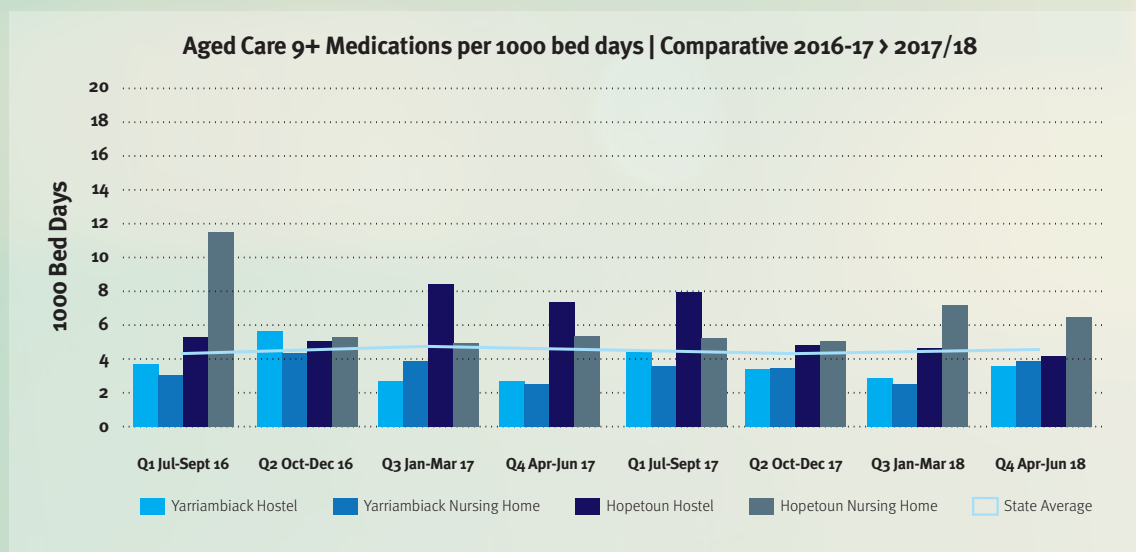
Team member Influenza Vaccination Program

All direct clinical care team members are strongly encouraged to take the opportunity to have the influenza vaccine. There is a risk they may be exposed to, and transmit the disease to co-workers, vulnerable patients, residents and their family. Maintaining a level of immunity in the Health care worker population ensures this risk of transmission is minimised.

At Rural Northwest Health, the team member influenza program is offered to all team members. People who get vaccinated are at lower risk of getting influenza than those who are not. They are less likely to be laid up in bed with sweats, shivers and muscle aches, and take time off work or their usual activities, or be hospitalised with complications.

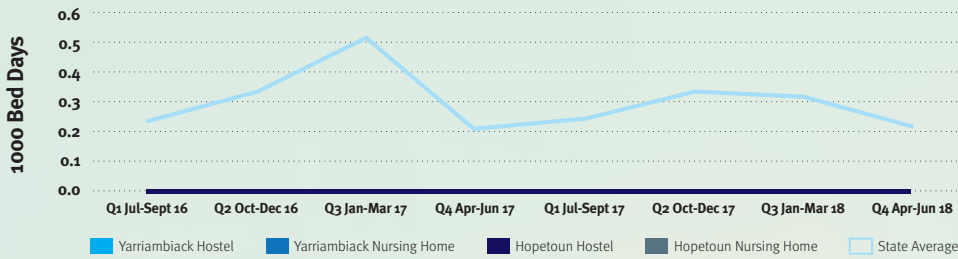
For these reasons, the Department of Health and Human Services set a staff influenza vaccination target for all health services every year. During 2017 the target was set at 75% and Rural Northwest Health achieved 84%. In 2018, we achieved 91%, which was six per cent higher than the average for the Grampians region and more than 10% higher than the Victorian average.

Public Sector Residential Aged Care Quality Indicators



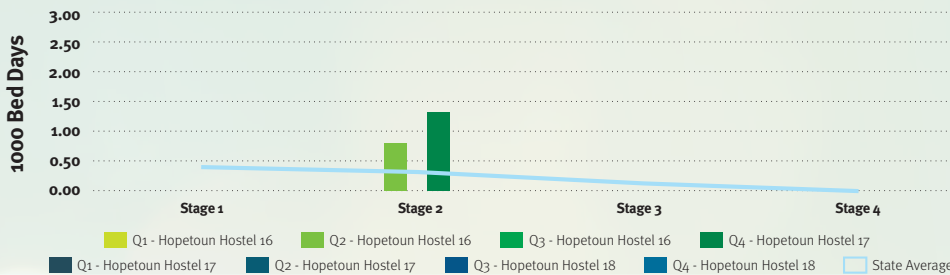
9+ medication is an ongoing issue at RNH. External pharmacy reviews have occurred and recommendation reports forwarded to GP's. We are however, aligned to the state average.

Aged Care Restraint Comparative 2016-17 > 2017/18



Rural Northwest Health has been clear of any restraints use for more than five years now. We have strategies in place to avoid the use of restraint.

Hopetoun Hostel Pressure Injury by Stage 2016-17 > 2017-18



Pressure injuries are identified early and as a result, only Stage one and two pressure injuries are found. Management of pressure injuries starts at admission with a comprehensive skin assessment and other strategies activated.

Pressure Injury Stages

Stage 1:

non-blanchable erythema. Area maybe painful, firm, soft, warmer or cooler compared to other tissue.

Stage 2:

partial thickness loss. Shallow open wound with a red pink wound bed.

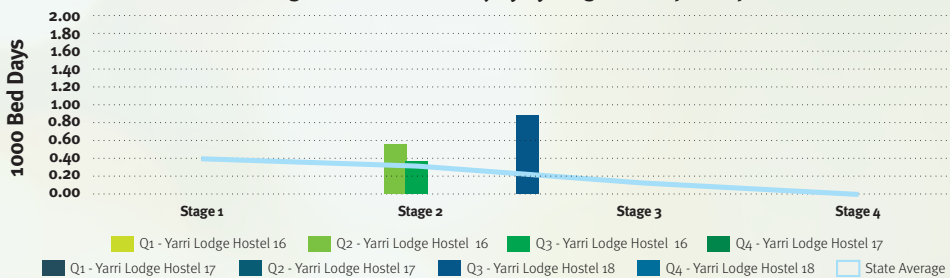
Stage 3:

full thickness skin loss.

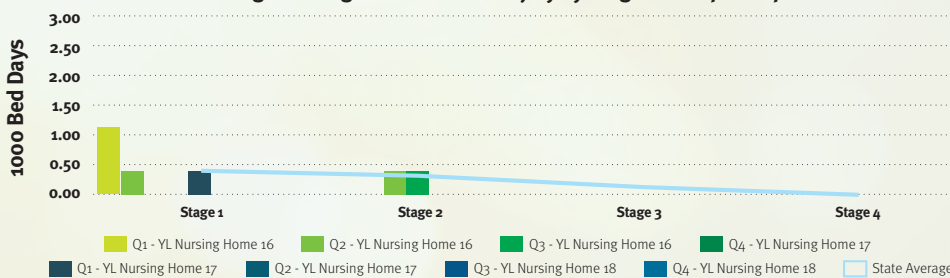
Stage 4:

full thickness tissue loss

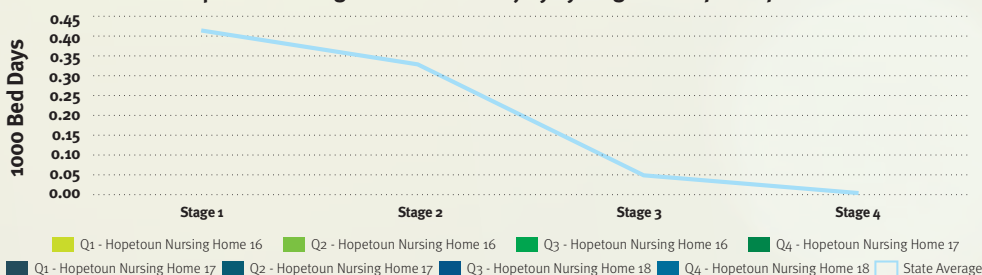
Yarri Lodge Hostel Pressure Injury by Stage 2016-17 > 2017-18



Yarri Lodge Nursing Home Pressure Injury by Stage 2016-17 > 2017-18



Hopetoun Nursing Home Pressure Injury by Stage 2016-17 > 2017-18



At your *Service*

Rural Northwest Health provides a range of services and programs that the community is able to access through in-patient, residential, home or community based services including:

After Hours

Service GPs, Nurse Practitioner and Nursing team members provide an After Hours - On Call service 24 hours a day 7 days a week at Warracknabeal and Hopetoun

Acute Care

Rural Northwest Health has 12 acute beds at the Warracknabeal campus and 4 acute beds at Hopetoun. Both campuses provide urgent care services.

<i>Acute Medical</i>	<i>Palliative Care</i>	<i>Pharmacy</i>
<i>Pathology Services</i>	<i>Urgent Care</i>	

Aged Care

Rural Northwest Health has 60 aged care places at the Warracknabeal Campus and 24 aged care places at Hopetoun.

<i>Respite Care</i>	<i>Cognitive Rehabilitative Therapist</i>
<i>Memory Support Unit</i>	<i>Lifestyle Program</i>
<i>High and Low Care accommodation</i>	

Medical Imaging

X-ray and 4D Ultrasound are provided at Warracknabeal by Rural Northwest Health contractors.

Community Health

Community and Allied Health services are provided across the three campuses at Warracknabeal, Beulah and Hopetoun:

Ante Natal and Domiciliary midwifery services
Asthma education and support
Diabetes education and support
District nursing services
Health education and promotion
Hospital in the home
Day Programs (Warracknabeal and Beulah)
Post Acute Care
Memory Support Nurse
Wellbeing Coordinator
Continence Nurse Advisor

Allied Health

<i>Occupational Therapy</i>	<i>Physiotherapy</i>	<i>Podiatry</i>
<i>Speech Pathology</i>	<i>Dietetics</i>	<i>Foot Care</i>
<i>Exercise Physiology</i>	<i>Social Work</i>	<i>Massage Therapy</i>

Support Services

Carer Support Services *Volunteer program*

Specialities

Ear Nose Throat *Cardiology*

Warracknabeal Campus

Dimboola Road
PO Box 386
Warracknabeal VIC 3393

Tel: (03) 5396 1200
Fax: (03) 5396 1210
Email: reception@rnh.net.au

Beulah Campus

Cnr Henty Hwy & Bell Street
PO Box 2
Beulah VIC 3395

Tel: (03) 5396 8200
Fax: (03) 5396 8201
Email: reception@rnh.net.au

Hopetoun Campus

12 Mitchell Place
Hopetoun VIC 3396

Tel: (03) 5083 2000
Fax: (03) 5083 2050
Email: reception@rnh.net.au


Important Telephone Numbers

Emergency Call.....000
Nurse on Call.....1300 606 024
Community Health (Wellbeing Coordinators).....5396 1238
District Nursing.....5396 1278
Occupational Therapy.....5396 1262
Freedom of Information5396 1200
Radiology.....5396 1200
Psychiatric Services (Horsham Office)1300 661 323
Yarriambiack Medical Clinic.....5396 1380
Hopetoun Medical Clinic.....5083 2080
Beulah Medical Clinic.....5396 8200
Tristar Medical Centre.....5394 1880

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www.rnh.net.au

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